## **Statement of Expenditures**

Page	

Prescribed by Secretary of State 2/01

Name of Committee in Full Hilliard Education Associ	arion	PAC		
F. Ahh Third Bank			080112	Amount 5,00
Address Main Branch	$\mathcal{P}^{o}$	rmant Fee		!
City	State	Zip Code	Check Number	
FATH Third Bank		•	M D Y	5,99
Fifth Third Bank Address Main Branch	Purpose Do 1777	unt For & C	lopying F	-ee
City	State	Zip Code	Check Number .	
To Whom Paid	l	<u> </u>	M D V	Amount
Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid	<u> </u>		M D Y	Amount
Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid	<u> </u>		M D Y	Amount
Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid		-	M D Y	Amount
Address	Purpose	· · · · · ·		
City	State	Zip Code	Check Number	1
To Whom Paid			M D Y	Amount
Address	Purpose		<u> </u>	
City	State	Zip Cude	Check Number	
To Whom Paid	ł		M D Y	Amount
Address	Purpose		1 1 1 1	<u> </u>
City	State	Zip Code	Check Number	